

| PETITION FOR PENSION OF TIME UNDER 37 CFR 1.136(a)  |  |            | Docket Number (Optional) 019957-011212US |            |  |
|---|--|------------|--|------------|--|
| FY 2005   |  |            |  |            |  |
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 10/081,455  |  |            | Filed February 21, 2002                  |            |  |
| For PRACTICAL IN VITRO SIALYLATION OF RECOMBINANT GLYCOPROTEINS   |  |            |  |            |  |
| Art Unit 1652   |  |            | Examiner Rao, Manjunath N.               |            |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |  |            |  |            |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |  |            |  |            |  |
|   |  | <u>Fee</u> | Small Entity Fee                         |            |  |
|   | One month (37 CFR 1.17(a)(1))  | \$120      | \$60                                     | \$ 60      |  |
|   | Two months (37 CFR 1.17(a)(2))   | \$450      | \$225                                    | \$         |  |
|   | Three months (37 CFR 1.17(a)(3))   | \$1020     | \$510                                    | \$         |  |
|   | Four months (37 CFR 1.17(a)(4))  | \$1590     | - \$795                                  | \$         |  |
|   | Five months (37 CFR 1.17(a)(5))  | \$2160     | \$1080                                   | \$         |  |
| Applicant claims small entity status. See 37 CFR 1.27.  |  |            |  |            |  |
|   | A check in the amount of the fee is enclosed.  |            |  |            |  |
|   | Payment by credit card. Form PTO-2038 is attached.   |            |  |            |  |
|   | The Director has already been authorized to charge fees in this application to a Deposit Account.  |            |  |            |  |
|   | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to  |            |  |            |  |
|   | Deposit Account Number <u>20-1430</u> . I have enclosed a duplicate copy of this sheet.  WARNING: Information on this form may become public. Credit card information should not be included on this form. |            |  |            |  |
| Provide credit card information and authorization on PTO-2038.  |  |            |  |            |  |
| Lamaba — — and Sanatan  |  |            |  |            |  |
| I am the applicant/inventor.  |  |            |  |            |  |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  |  |            |  |            |  |
| attorney or agent of record. Registration Number 46,226   |  |            |  |            |  |
| attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34  |  |            |  |            |  |
| Jennifer Wallett August 8, 2006 Signature  Date   |  |            |  |            |  |
| _   | Jennifer L. Wahlsten, Reg. No. 46,226  |            | 415 576-0200                             |            |  |
|   | Typed or printed name  |            | Telephone                                | e Number · |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |  |            |  |            |  |
| Total of forms are submitted.   |  |            |  |            |  |

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